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# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF VIRGINIA

## CHAPTER 13 PLAN AND RELATED MOTIONS

| Name of Debtor(s)         | Carol Patricia Washington  | Case No: | 17-67737 |
|---------------------------|--|----------|----------|
| This plan, dated <u>O</u> | ctober 27, 2015 , is:  |          |          |
|                           | the <i>first</i> Chapter 13 plan filed in this case. a modified Plan, which replaces theconfirmed orunconfirmed Plan dated . |          |          |
|                           | Date and Time of Modified Plan Confirming Hearing:   |          |          |
|                           | Place of Modified Plan Confirmation Hearing:   |          |          |
| The                       | Plan provisions modified by this filing are:   |          |          |
| Cred                      | litors affected by this modification are:  |          |          |

NOTICE: YOUR RIGHTS WILL BE AFFECTED. You should read these papers carefully. If you oppose any provision of this Plan, or if you oppose any included motions to (i) value collateral, (ii) avoid liens, or (iii) assume or reject unexpired leases or executory contracts, you MUST file a timely written objection.

This Plan may be confirmed and become binding, and the included motions in paragraphs 3, 6, and 7 to value collateral, avoid liens, and assume or reject unexpired leases or executory contracts may be granted, without further notice or hearing unless a written objection is filed not later than seven (7) days prior to the date set for the confirmation hearing and the objecting party appears at the confirmation hearing.

The debtor(s)' schedules list assets and liabilities as follows:

Total Assets: \$545,007.00

Total Non-Priority Unsecured Debt: \$234,679.10

Total Priority Debt: \$3,800.00 Total Secured Debt: \$395,332.00 A 111

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| 1. | Funding of Plan.     | The debt   | or(s) propos | e to pay the trustee | the sum of \$500.0  | 00 Monthly | y for 60 months. | Other payments to |
|----|----------------------|------------|--------------|----------------------|---------------------|------------|------------------|-------------------|
|    | the Trustee are as f | follows: _ | NONE         | The total amount     | to be paid into the | plan is \$ | 30,000.00        |                   |

- 2. Priority Creditors. The Trustee shall pay allowed priority claims in full unless the creditor agrees otherwise.
  - A. Administrative Claims under 11 U.S.C. § 1326.
    - 1. The Trustee will be paid the percentage fee fixed under 28 U.S.C. § 586(e), not to exceed 10%, of all sums disbursed except for funds returned to the debtor(s).
    - 2. Debtor(s)' attorney will be paid \$1500.00 balance due by the Hyatt Legal Plan of the total fee of \$1990.00. The \$0.00 in Debtor(s)' attorney's fees to be paid by the Chapter 13 Trustee are broken down as follows:
      - (i) \$0.00: Fees to be approved, or already approved, by the Court at initial plan confirmation;
        (ii) \$\_\_\_\_\_: Additional pre-confirmation or post-confirmation fees already approved by the Court by separate order or in a previously confirmed modified plan [ECF # : \$; ECF #: \$; ECF #
      - (iii) \$\_\_\_\_\_: Additional post-confirmation fees being sought in this modified plan, which fees will be approved when this plan is confirmed.
  - B. Claims under 11 U.S.C. §507.

The following priority creditors will be paid by deferred cash payments pro rata with other priority creditors or in monthly installments as below, except that allowed claims pursuant to 11 U.S.C. § 507(a)(1) will be paid prior to other priority creditors but concurrently with administrative claims above:

| <u>Creditor</u>           | Type of Priority Taxes and certain other debts | Estimated Claim | Payment and Term                  |
|---------------------------|--|-----------------|-----------------------------------|
| Culpeper County Treasurer |  | 1,000.00        | Prorata                           |
| Culpeper County Treasurer | Taxes and certain other debts                  | 1,300.00        | 60 months<br>Prorata<br>60 months |

- 3. Secured Creditors: Motions to Value Collateral ("Cramdown"), Collateral being Surrendered, Adequate Protection Payments, and Payment of certain Secured Claims.
  - A. Motions to Value Collateral (other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) or by the final paragraph of 11 U.S.C. § 1325(a)). Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion to value collateral as set forth herein.

This section deals with valuation of certain claims secured by real and/or personal property, other than claims protected from "cramdown" by 11 U.S.C. § 1322(b)(2) [real estate which is debtor(s)' principal residence] or by the final paragraph of 11 U.S.C. § 1325(a) [motor vehicles purchased within 910 days or any other thing of value purchased within 1 year before filing bankruptcy], in which the replacement value is asserted to be less than the amount owing on the debt. Such debts will be treated as secured claims only to the extent of the replacement value of the collateral. That value will be paid with interest as provided in sub-section D of this section. You must refer to section 3(D) below to determine the interest rate, monthly payment and estimated term of repayment of any "crammed down" loan. The deficiency balance owed on such a loan will be treated as an unsecured claim to be paid only to the extent provided in section 4 of the Plan. The following secured claims are to be "crammed down" to the following values:

| Creditor     | <u>Collateral</u> | Purchase Date | Est Debt Bal. | Replacement Value      |
|--------------|-------------------|---------------|---------------|------------------------|
| <del>,</del> |                   |               |               | TEO PAGE VALLE I DIAME |

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### В. Real or Personal Property to be Surrendered.

Upon confirmation of the Plan, or before, the debtor(s) will surrender his/her/their interest in the collateral securing the claims of the following creditors in satisfaction of the secured portion of such creditors' allowed claims. To the extent that the collateral does not satisfy the claim, any timely filed deficiency claim to which the creditor is entitled may be paid as a non-priority unsecured claim. Confirmation of the Plan shall terminate the automatic stay as to the interest of the debtor(s) and the estate in the collateral.

Creditor

Collateral Description

Estimated Value

Estimated Total Claim

KOF Asociates (see para 11B)

Kirby vacuum cleaner system

0.00

271.68

### C, Adequate Protection Payments.

The debtor(s) propose to make adequate protection payments required by 11 U.S.C. § 1326(a) or otherwise upon claims secured by personal property, until the commencement of payments provided for in sections 3(D) and/or 6(B) of the Plan, as follows:

Creditor -NONE-

Collateral Description

Adeq. Protection Monthly Payment

To Be Paid By

Any adequate protection payment upon an unexpired lease of personal property assumed by the debtor(s) pursuant to section 6(B) of the Plan shall be made by the debtor(s) as required by 11 U.S.C. § 1326(a)(1)(B) (payments coming due after the order for relief).

D. Payment of Secured Claims on Property Being Retained (except only those loans provided for in section 5 of the Plan):

This section deals with payment of debts secured by real and/or personal property [including short term obligations, judgments, tax liens and other secured debts]. After confirmation of the Plan, the Trustee will pay to the holder of each allowed secured claim, which will be either the balance owed on the indebtedness or, where applicable, the collateral's replacement value as specified in sub-section A of this section, whichever is less, with interest at the rate provided below, the monthly payment specified below until the amount of the secured claim has been paid in full. Upon confirmation of the Plan, the valuation and interest rate shown below will be binding unless a timely written objection to confirmation is filed with and sustained by the Court.

Creditor Aces Electric

Collateral 23 Rosewood Street, Stafford, VA (TAV \$172,700.00)(AMV

Approx. Bal. of Debt or "Crammed Down" Value

2.000.00

Interest Rate

4.25%

Monthly Paymt & Est. Term\*\*

37.06

60 months

E. Other Debts.

\$208,624.00)

Debts which are (i) mortgage loans secured by real estate which is the debtor(s)' primary residence, or (ii) other long term obligations, whether secured or unsecured, to be continued upon the existing contract terms with any existing default in payments to be cured pursuant to 11 U.S.C. § 1322(b)(5), are provided for in section 5 of the Plan.

### 4. Unsecured Claims.

- A. Not separately classified. Allowed non-priority unsecured claims shall be paid pro rata from any distribution remaining after disbursement to allowed secured and priority claims. Estimated distribution is approximately 100 %. The dividend percentage may vary depending on actual claims filed. If this case were liquidated under Chapter 7, the debtor(s) estimate that unsecured creditors would receive a dividend of approximately 100 %.
- Separately classified unsecured claims. В.

Creditor -NONE-

Basis for Classification

Treatment

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- 5. Mortgage Loans Secured by Real Property Constituting the Debtor(s)' Primary Residence; Other Long Term Payment Obligations, whether secured or unsecured, to be continued upon existing contract terms; Curing of any existing default under 11 U.S.C. § 1322(b)(5).
  - A. Debtor(s) to make regular contract payments; arrears, if any, to be paid by Trustee. The creditors listed below will be paid by the debtor(s) pursuant to the contract without modification, except that arrearages, if any, will be paid by the Trustee either pro rata with other secured claims or on a fixed monthly basis as indicated below, without interest unless an interest rate is designated below for interest to be paid on the arrearage claim and such interest is provided for in the loan agreement.

|                        |                                | Regular        |           | Arrearage |             | Monthly   |
|------------------------|--------------------------------|----------------|-----------|-----------|-------------|-----------|
|                        |                                | Contract       | Estimated | Interest  | Estimated   | Arrearage |
| <u>Creditor</u>        | <u>Collateral</u>              | <u>Payment</u> | Arrearage | Rate      | Cure Period | Payment   |
| City Nti Bk/Ocwen Loan | 11135 Mitchell Road, Culpeper, | 635.00         | 0.00      | 0%        | 60 months   | Prorata   |
| Service                | VA (TAV)                       |                |           |           |             |           |
| Signal Financial FCU   | 10415 Morton Lane, Mitchells,  | 418.00         | 13,000.00 | 0%        | 60 months   | Prorata   |
|                        | Va (TAV \$145,100.00)          |                |           |           |             |           |
| Signal Financial FCU   | 10415 Morton Lane, Mitchells,  | 1,075.00       | 1200.00   | 0%        | 0 months    |           |
|                        | Va (TAV \$145,100.00)          |                |           |           |             |           |
| Wells Fargo Bank Nv Na | 23 Rosewood Street, Stafford,  | 160.00         | 200.00    | 0%        | 60 months   | Prorata   |
|                        | VA (TAV \$172,700.00)(AMV      |                |           | •         |             |           |
|                        | \$208,624.00)                  |                |           |           |             |           |
| Wells Fargo Bank Nv Na | 11135 Mitchell Road, Culpeper, | 118.00         | 0.00      | 0%        | 0 months    |           |
|                        | VA (TAV)                       |                |           |           |             |           |
| Wells Fargo Hm         | 23 Rosewood Street, Stafford,  | 1,052.00       | 1,200.00  | 0%        | 60 months   | Prorata   |
| Mortgag                | VA (TAV \$172,700.00)(AMV      |                |           |           |             |           |
| -                      | \$208,624.00)                  |                |           |           |             |           |

B. Trustee to make contract payments and cure arrears, if any. The Trustee shall pay the creditors listed below the regular contract monthly payments that come due during the period of this Plan, and pre-petition arrearages on such debts shall be cured by the Trustee either pro rata with other secured claims or with monthly payments as set forth below.

|          |                   | Regular        |                    |           | Monthly        |
|----------|-------------------|----------------|--------------------|-----------|----------------|
|          |                   | Contract       | Estimated Interest | Term for  | Arrearage      |
| Creditor | <u>Collateral</u> | <u>Payment</u> | Arrearage Rate     | Arrearage | <u>Payment</u> |
| -NONE-   |                   |                |                    |           |                |

C. Restructured Mortgage Loans to be paid fully during term of Plan. Any mortgage loan against real estate constituting the debtor(s)' principal residence upon which the last scheduled contract payment is due before the final payment under the Plan is due shall be paid by the Trustee during the term of the Plan as permitted by 11 U.S.C. § . 1322(c)(2) with interest at the rate specified below as follows:

|          |                   | Interest | Estimated    |                            |
|----------|-------------------|----------|--------------|----------------------------|
| Creditor | <u>Collateral</u> | Rate     | <u>Claim</u> | Monthly Paymt& Est. Term** |
| -NONE-   |                   |          |              |                            |

- Unexpired Leases and Executory Contracts. The debtor(s) move for assumption or rejection of the executory contracts and leases listed below.
  - A. Executory contracts and unexpired leases to be rejected. The debtor(s) reject the following executory contracts.

<u>Creditor</u> <u>Type of Contract</u>
Verizon Cell Phone

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**B.** Executory contracts and unexpired leases to be assumed. The debtor(s) assume the following executory contracts. The debtor agrees to abide by all terms of the agreement. The Trustee will pay the pre-petition arrearages, if any, through payments made pro rata with other priority claims or on a fixed monthly basis as indicated below.

|                |                          |                  | Monthly     |             |
|----------------|--------------------------|------------------|-------------|-------------|
|                |                          |                  | Payment     | Estimated   |
| Creditor       | Type of Contract         | <u>Arrearage</u> | for Arrears | Cure Period |
| Carlton Swader | Lease/Executory Contract | 0.00             |             | 0 months    |
| Sari Jackson   | Lease/Executory Contract | 0.00             |             | 0 months    |

### 7. Liens Which Debtor(s) Seek to Avoid.

A. The debtor(s) move to avoid liens pursuant to 11 U.S.C. § 522(f). The debtor(s) move to avoid the following judicial liens and non-possessory, non-purchase money liens that impair the debtor(s)' exemptions. Unless a written objection is timely filed with the Court, the Court may grant the debtor(s)' motion and cancel the creditor's lien. If an objection is filed, the Court will hear evidence and rule on the motion at the confirmation hearing.

Creditor -NONE-

Collateral

**Exemption Amount** 

Value of Collateral

B. Avoidance of security interests or liens on grounds other than 11 U.S.C. § 522(f). The debtor(s) have filed or will file and serve separate pleadings to avoid the following liens or security interests. The creditor should review the notice or summons accompanying such pleadings as to the requirements for opposing such relief. The listing here is for information purposes only.

Creditor -NONE-

Type of Lien

Description of Collateral

Basis for Avoidance

## 8. Treatment and Payment of Claims.

- All creditors must timely file a proof of claim to receive payment from the Trustee.
- If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge.
- If a claim is listed in the plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan.
- The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.
- 9. Vesting of Property of the Estate. Property of the estate shall revest in the debtor(s) upon confirmation of the Plan.

  Notwithstanding such vesting, the debtor(s) may not sell, refinance, encumber real property or enter into a mortgage loan modification without approval of the Court after notice to the Trustee, any creditor who has filed a request for notice and other creditors to the extent required by the Local Rules of this Court.
- 10. Incurrence of indebtedness. The debtor(s) shall not voluntarily incur additional indebtedness exceeding the cumulative total of \$5,000 principal amount during the term of this Plan, either unsecured or secured against personal property, except upon approval of the Court after notice to the Trustee, any creditor who has filed a request for notice, and other creditors to the extent required by the Local Rules of this Court.

### 11. Other provisions of this plan:

A. Attorneys Fees. Attorneys Fees noted in Paragraph 2A shall be approved on the confirmation date unless previously objected to. Said allowed fees shall be paid by the Trustee prior to the commencement of payments required to be made by the Trustee under Paragraphs 2B, 4, 5, and 6 herein, except that attorneys fees shall be paid pro rata with any distribution to domestic support order claimants under paragraph 2B.

B. Deficiency Claims for Surrendered Property. Any unsecured proof of claim for a deficiency which results from the surrender and liquidation of the collateral noted in paragraph 3.B of this plan must be filed by the earlier of the following dates or such claim will be forever barred: (1) within 180 days of the date of the first confirmation order

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confirming a plan which provides for the surrender of said collateral, or (2) within the time period set for the filing of an unsecured deficiency claim as established by any order granting relief from the automatic say with respect to said collateral. Said unsecured proof of claim for a deficiency must include appropriate documentation establishing that the collateral surrendered has been liquidated, and the proceeds applied, in accordance with applicable state law.

C. Treatment of Judgment Liens. Pursuant to Sec. 1322(b)(2) the claims listed in paragraph 3D that are secured by a judicial lien on real property of the debtor(s), shall be modified as follows: After confirmation of the plan, the Trustee will pay to said creditors the estimated amount in column 3 of paragraph 3D, with interest at the rate stated in column 4 of paragraph 3D. Upon confirmation of the plan, said interest rate shown will be binding unless a timely written objection to confirmation is filed by a party in interest and sustained by the Court. Payments distributed by the Trustee are subject to the availability of funds. After the full payment of said amount by the trustee and a Discharge Order being entered by the Court upon completion of the plan, the debtor(s) may either: (a) request an Order from the Court stating that the lien is satisfied and released; or (b) file in the appropriate court copies of (1) the last confirmed plan, (2) the Order Confirming the Plan and (3) the Discharge Order to show that the lien has been satisfied in full.

D. Plan Payment Method. Plan payment will be made via: WDO (Husband Wife Both ); or by PDO X .

| S. |
|----|
| S. |

Dated: October 27, 2015

Debtor

Marshall M. Slayton VSB# 37362

**Debtor's Attorney** 

**Exhibits:** 

Copy of Debtor(s)' Budget (Schedules I and J);

Matrix of Parties Served with Plan

Certificate of Service

, I mailed a copy of the foregoing to the creditors and parties in interest on the attached Service

List.

Marshall M. Slayton VSB# 37362

Signature

420 Park Street

Charlottesville, VA 22902

Address

(434) 979-7900

Telephone No.

Ver. 09/17/09 [effective 12/01/09]

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|  |  |   | Debter 1   | Carol Patricia Washington  |   | Case number (# known)   | 15-62032   |
|--|--|---|--|--|---|---|--|
| ili in litis Intormation to Identify your case:  |  |   |  |  |   |   |  |
| rebtor 1 Carol Patricia Washington   |  |   |  |  |   | For Deblor 1  | For Debtor 2 or<br>non-filing spouse   |
| rebtor 2<br>Spozes, #(Eng)   |  |   |  | opy Sine 4 haro  | 4.  | \$ 925.04   | \$ NIA   |
| niled States Banksuptcy Court for the: WESTERN DISTRIC   | OF VIRGINIA  |   | 5. LI<br>5a  | st alt payroll deductions:<br>a. Tax, Medicare, and Social Security deductions   | 5a.   | \$ 127.53   | \$ NIA   |
| ase number 15-62032  |  | Check if this is:   | 56   | . Mandatory contributions for retirement plans   | 5b.<br>5c.  | \$ 0.00<br>\$ 231,27  | \$ N/A   |
| (incen)  |  | An amended filing     A supplement showing post-petition chapter  | 56<br>60   |  | 5d.   | \$ 0.00   | \$ N/A   |
| 26.115   |  | 13 Income as of the following date:   | 5c<br>5f   |  | 5e.<br>5f.  | \$ <u>27.60</u><br>\$ <u>0.00</u>   | \$ N/A<br>\$ N/A   |
| Official Form B 61   |  | MM / DD/ YYYY   | . 5 <u>t</u>   |  | 5g.<br>5h.+   | \$  | \$ <u>N/A</u><br>+ \$ N/A  |
| Schedule I: Your Income<br>as complete and accurate as possible. If two married par  | opio are filing logether (Debtor 1 a   | 12/13<br>and Debtor 2), both are equally responsible for  | 1  | dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5l   | 6.  | \$ 401.39   |  |
| pplying correct information. If you are married and not illi<br>couse, if you are separated and your spouse is not filing w  | with you, do not include informatio  | n about your spouse. If more space is needed,   |  | atculate total monthly take-home pay. Subtract line 6 from line 4  | . 7.  | \$ 623,65   | \$\$   |
| tach a separate sheet to this form. On the top of any addit  | donal pages, write your name and   | case number (if known). Answer every question   | n, 8. L.1<br>8:  |  | iness,  |   |  |
| Describe Employment Fill In your employment  |  |   | _  | profession, or farm<br>Attach a statement for each property and business showing gracelets, ordinary and necessary business expenses, and the  | OSS<br>ofal   |   |  |
| Information.   | Dablor ?   | Debtor 2 or non-filing spouse   |  | monthly net income.  | 8a.<br>8b.  | \$ 2,910.00   | \$ N/A N/A   |
| If you have more than one job,<br>allech a separate page with Employment status  | ■ Employed   | ☐ Employed ☐ Not employed *****   | 8b<br>Bo   | . Family support payments that you, a non-filing spouse, or  |   | \$ 0,60   | 3N/A   |
| information about additional   | ☐ Not employed   | _ rest compragate   |  | regularly receive<br>Include alimony, spousal support, chiki support, mainlenance,   | divorce<br>Bo   |   | \$ N/A   |
| Include part time, seasonal, or<br>self-employer's name  | Shipping and receiving   |   |  |  | 8d.   | \$ 0.00<br>\$ 0.00  | \$ N/A   |
| aun ampiojos autic   | Kohi's Dept. Stores, Inc.  |   | _ 86<br>81   | Other government assistance that you regularly receive   | 8a.   | \$2,117.00  | \$ N/A   |
| Occupation may include student Employer's address<br>or homemaker, if it applies.  | N56 W17000 Ridgewood Dri<br>Menomonee Falls, WI 53051  | ve  |  | tnoude cash assistance and the value (if known) of any non-ca<br>that you receive, such as food stamps (benefits under the Sup   | ish assistance<br>plementel   |   |  |
| H  |  | <del></del>   | _  | Nutrition Assistance Program) or trousing subsidies.<br>Specify.   | 8f.   | \$ 6.00   | \$ NIA   |
| How long employed s  | there? 7 years   |   | 8ş<br>8)   |  | 8g.<br>Ity 8h.+   | \$ 0.00   | \$ NIA<br>+ \$ NIA   |
| Give Details About Monthly Income  |  | 7-001-0   | -  | Health insurance cost reimburment by Verizon   |   | \$ 29.90  | \$ N/A   |
| stimate monthly lecome as of the data you file this form. If<br>ouse unless you are separated,   | ryou nave nothing to report for any ill  | нь, чин эм ягин араса, ілсіцов ўонг пол-fáfrig  | 9. A   | dd ail other Income. Add lines 8a+8b+8c+8d+8e+8li+8g+8h.   | 9.  | \$ 6,091.90   | \$ N/A   |
| you or your non-filing spouse have more than one employer, c<br>ore space, attach a separate sheet to this form.   | combine the information for all emplo  | yers (or that person on the lines below. If you need  | 10. C  | alcutate monthly income. Add line 7 + line 9,  | 10. 5   | 6,615.55 + \$   | N/A = \$ 6,616.65  |
| ore agrees, estados e acquerata pieres to alla mine.   | ſ  | For Debtor 1 For Debtor 2 or  | ٨  | dd the entries in line 10 for Debtor 1 and Debtor 2 or non-fiting spot   |   |   |  |
|  | -<br>-   | non-filling spause  | ln   | tate all other regular contributions to the expenses that you fis<br>clude contributions from an unmarried partner, members of your ho   | t in Schadule J.<br>ousehold, your depen  | dents, your roommak   | es, and  |
| List monthly gross wages, salary, and commissions (to deductions). If not paid monthly, calculate what the month   | before all payroll<br>hly wage would be. 2. \$   | 925.04 \$ N/A   | D  | ther friends or relatives.<br>o not include any amounts already included in lines 2-10 or amount<br>position.  | s that are not evallab  | la to pay expenses its  | sted in Schedule J.<br>11. +\$ 0.00  |
| Estimate and list monthly overtime pay.  | 3. +\$   | 0.00 +\$ N/A  |  | pecify:<br>dd the amount in the last column of line 10 to the amount in lie  | - 44. Yha raavii in ii  | is comblered monthly  |  |
| Catculate gross Income, Add fine 2 + line 3,   | 4. \$  | 928,04 \$ NIA   | w  | frite that amount on the Summary of Schedulos and Statistical Sun  | mary of Certain Liab  | ilities and Related Da  | ta, if it 12. \$ 6,615.55  |
| •  | L. <u></u>   |   | Bļ   | pplies   |   |   | Combined   |
|  |  |   | 13. D  | o you expect an increase or decrease within the year after you   | file this form?   |   | monthly Income   |
|  |  |   | <b>1</b>   |  |   | A   |  |
|  |  |   |  | -  |   |   |  |
|  |  |   |  |  |   |   |  |
|  |  |   |  |  |   |   |  |
| Fit in this information to identify your case  |  |   | Pub.   | led On at Defelds Westlester   |   | hara aumh w fill acum)  | 46 82032   |
| Debtor 1 Carof Patricia Washington   |  |   |  | lor 1 Carol Patricia Washington  | c   | esse number (4 koown)   | <u>15-62032</u>  |
| Debtov Z   |  | Check if this is:   |  | Utilities:<br>Ga. Electricity, heal, natural gas   | c   | 6a. \$  | 264.00   |
| (Spouse, if Eting)   |  | An amended fiting A supplement showing post-petition chapter  | 6.   | UtillUes: 6a. Electricity, heat, natural gas 6b. Water, sever, garbago collection 6c. Telephone, cell phone, laternet, satelfile, and cable services   |   | 6a. \$<br>6b. \$<br>6c. \$  | 264.00<br>25.00<br>217.00  |
|  |  | <ul> <li>An amended fiting</li> <li>A supplement showing post-petition chapter</li> <li>a expenses as of the following date:</li> </ul>   | 6.   | Utilities: 6a. Electricity, heat, natural gas 6b. Water, sever, garbage collection 6c. Telsphone, cull phone, internet, satellite, and cable services 6d. Other. Specity: Food and housekeeping supplies   |   | 6a. \$<br>6b. \$<br>6c. \$<br>6d. \$<br>7. \$   | 284.00<br>25.00<br>217.00<br>9.00<br>300.00  |
| Un'ted States Bankruptcy Court for the: WESTERN DISTRICT   |  | An amended fiting     A supplement showing post-petition chapter 13 expenses as of the following date:     MM / DD / YYYY   | 6.<br>7.<br>8.<br>9.                                       | Utilities: 6a. Electricity, heat, natural gas 6b. Water, sever, garbaga coBection 6c. Telephone, coll phone, lelarnel, satelfile, and cable services 6d. Other. Specify. Food and housekeeping supplies Childcare and childrafe's advancation costs  |   | 6a. \$6b. \$6c. \$6d. \$6d. \$8. \$8. \$8. \$8. \$  | 264.00<br>25,00<br>217.00<br>0,00  |
| Case number 15-62032   |  | <ul> <li>An amended fiting</li> <li>A supplement showing post-petition chapter</li> <li>a expenses as of the following date:</li> </ul>   | 7.<br>8.<br>9.<br>or to.                                   | Utilities: 6a. Electicity, heat, natural gas 6b. Water, sever, garbaga coBection 6c. Telephone, coll phone, fallernet, satelfile, and cable services 6d. Other. Specify; Food and housekeeping supplies follidors and children's advantation costs Clothiag, lasmäry, and dry cleaning Personal care products and services   |   | 6a. \$<br>6b. \$<br>6c. \$<br>7. \$<br>8. \$  | 284.00<br>25.00<br>217.00<br>0.00<br>300.00<br>0.00<br>55.00<br>5.00   |
|  |  | An amended fitting     A supplement showing post-petition chapter 13 expenses as of the following date:      MM / DD / YYYY      A separate fitting for Debtor 2 because Debtor   | 6.<br>7.<br>8.<br>9.<br>or to.<br>11.                      | Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewor, garbago coßection 6c. Telephone, coll phone, felormel, satelfile, and cable services 6d. Cline: Specify; Food and housekeeping supplies Childcare and childrarie seducation costs Clothing, laundry, and dry cleaning Personal care products and services Medical and dental exponses Transportation, include gas, maintenance, bus or tain fare.  |   | 6a. \$  | 264.00<br>25.00<br>217.00<br>6.00<br>306.00<br>6.00<br>55.00   |
| Case number 15-62032   |  | An amended fitting     A supplement showing post-petition chapter 13 expenses as of the following date:      MM / DD / YYYY      A separate fitting for Debtor 2 because Debtor   | 7.<br>8.<br>9.<br>or 10.<br>11.<br>12.                     | Utilities: 6a. Electicity, heat, natural gas 6b. Water, sewor, garbago coBection 6c. Telephone, coll phone, felornel, satellite, and cable services 6d. Cline: Specify; Food and housekeeping supplies Childcare and childrarie seducation costs Cfubing, laundry, and dry cleaning Personal care products and services Medical and dental exponses Transportation, include gas, maintenance, bus or train fare. Do not include car payments.  |   | 6a. \$ 6b. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$   | 264.00<br>25.00<br>217.00<br>0.00<br>300.00<br>60.00<br>5.00<br>10.00<br>120.00  |
| Case number 15-82032 (ffsacer) Official Form B 6J Schedule J: Your Expenses  | FOF VIRGINIA   | A supplement showing post-petition chapter 13 expostes as of the following date:     MM / DD / YYYY      A separate filing for Debtor 2 bocause Debtor 2 maintains a separate hossehold   | 6. 7. 8. 9. or 10. 11. 12. 13. 14.                         | Utilities: 6a. Electricity, heat, natural gas 6b. Water, sever, garbage collection 6c. Telephone, coll phone, findernet, satellite, and cable services 6d. Other. Speecity; Food and housekeeping supplies Childoren and children's advantation costs Clothing, learning, and dry cleaning Personal care products and services Medical and dental exponses Transportation, include gas, maintenance, bus or train fare. Do net include care payments. Entortainment, clubs, recreation, newspapers, magazines, and Charliable contributions and religious donations  | if baoks  | 6a. \$  | 264.00<br>25.00<br>217.00<br>6.00<br>300.00<br>6.00<br>55.00<br>10.00  |
| Case number 15-82032 (ffsacor)  Official Form B 6.J  Schedule J: Your Expenses Be as complete and accurate as possible. If two mardet information. If more opace is needed, attach another sh  | OF VIRGINUA  | A supplement attorwing post-petition chapter 13 expenses as of the following date:     MM/DD/YYYY     A separate fifing for Debtor 2 bocause Debtor 2 maintains a separate hossehold  12/3/   | 6. 7. 8. 9. or 10. 11. 12. 13. 14.                         | Utililles: 6a. Electicity, heat, natural gas 6b. Water, sever, garbage collection 6c. Telephone, coll phone, felorine, satellite, and cable services 6d. Other. Speecity: Food and housekeeping supplies Childerne and children's advantation costs Clothing, latmidy, and dry cleaning Personal care products and services Medical and dental exponses Tensportation, include gas, maintenance, bus or train fare. Do not include care payments. Entortainment, clubs, recreation, newspapers, magazines, and Charitable contributions and religious donations Insurance. Do not include issurance deducted from your pay or included in its Sa. Life insurance.  | if baoks  | 6a. \$ 6b. \$ 6c. \$ 6d. \$ 7. \$ 6. \$ 9. \$ 10. \$ 11. | 264.00 25.00 217.00 0.00 300.00 0.00 50.00 10.00 100.00 110.00 110.00 110.00   |
| Case number 15-82032 (ffsacor)  Official Form B 6J  Schedule J: Your Expenses Be as complete and accurate as possible. If two marded information. If more space is needed, attach another sh number (if known). Answer every question.   | OF VIRGINUA  | A supplement attorwing post-petition chapter 13 expenses as of the following date:     MM/DD/YYYY     A separate fifing for Debtor 2 bocause Debtor 2 maintains a separate hossehold  12/3/   | 6. 7. 8. 9. or 10. 11. 12. 13. 14.                         | Utilities: 6a. Electricity, heat, natural gas 6b. Water, sewor, garbago coßection 6c. Telephone, coll phone, felorinet, satellite, and cable services 6d. Clinet. Speedly: Food and housekeeping supplies Childcare and childraries aducation costs Clothing, learning, and dry cleaning Personal care products and services Medical and dental exponses Transportation, include gas, maintenance, bus or train fare. Do not include care payments. Entortainment, clubs, recreation, newspapers, magazines, and Charliable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in its 15b. Lefalts insurance 15b. Healts insurance 15b. Vehicle insurance  | if baoks  | 6a. \$ 6b. \$ cc. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$   | 264.00 25.00 217.00 0.00 300.00 0.00 60.00 5.00 10.00 120.00 120.00 140.00 110.00 120.00 120.00  |
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| Case number 15-82032 (ffincer)  Official Form B 6J  Schedule J: Your Expenses Be as complete and accurate as possible. If two mardet information. If more space is needed, attach another sh number (if known). Answer every question.  Parameter beacribe Your Household  I. Is this a joint case?  No. Go to line 2.  Yes. Does Deblor 2 Itvo in a separate howsehold  No. Go to line 2.   | of OF VIRGINNA  Independent are filling together, both a heet to fills form. On the top of any   | A supplement attorwing post-petition chapter 13 expenses as of the following date:     MM/DD/YYYY     A separate fifing for Debtor 2 bocause Debtor 2 maintains a separate hossehold  12/3/   | 6. 7. 8. 9. 10. 11. 12. 13. 14. 15.                        | Utililles: 6a. Electricity, heat, natural gas 6b. Water, sewor, garbago collection 6c. Telephone, coll phone, follornel, satelfile, and cable services 6d. Other. Specify: Food and housekeeping supplies Childcare and children's aducation costs Cfothing, laundry, and dry cleaning Personal care products and services Medical and clental expanses Transportation, Include gas, maintenance, bus or tain fate. Do not include car payments. Entortationment, cludes, recreation, newspapers, magazines, and Charitabia contributions and religious domations Insurance. Do not include insurance and educated from your pay or included in lin 15a. Life insurance. 15b. Health insurance. 15b. Vehicle Insurance. 15c. Vehicle Insurance. Specify. Tages. Do not include laxes deducted from your pay or included in Specify. Personal property taxes Specify. Tage 8. Inspections Specify. Tage 8. Inspections Specify. Tage 8. Inspections Tag. Car payments.  | I books   | 6a. \$ 6b. \$ 5c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15a. \$ 15b. \$ 15c. \$ 15c. \$   | 264.00 25.00 217.00 0.00 300.00 0.00 60.00 5.00 10.00 120.00 120.00 120.00 100.00 173.00 173.00 10.00 173.00   |
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| Case number 45-52032 (stracers)  Official Form B 6J  Schedule J: Your Expenses Es as complete and accerate as possible. If two mardet information. If more space is needed, attach another sh number (if known), Answer every question.  The state of the Your Household  Is this a joint case?  No. Go to line 2.  Yes. Debter 2 live in a separate household  No. Go to line 2.  No. Go to line 2.  No. Do you have dependents?  No. Do not lest Debter 2 must file in separate household in the control of the con | d people are filling together, both a heet to this form. On the top of any drawn of the filling together, both a heet to this form. On the top of any drawn of the filling together, both and the filling together, both and the filling together the better 2 Mothor  Mothor  Ala unless you are using this form his is a supplemental Schadule J, of assistance if you know behaviour it you know behaviour it you know  | A supplement drowing post-petition chapter 13 expenses as of the following date:   MM/DD/YYYY   | 6. 7. 8. 9. 10. 11. 12. 13. 14. 15.  16.  17.  18. 19. 20. | Utililles: 6a. Electricity, heat, natural gas 6b. Water, sewor, garbago collection 6c. Telephone, coll phono, follomet, satellite, and cable services 6c. Offer. Speedly: Food and housekeeping supplies Children and children's advantation costs Clothing, lasmary, and dry cleaning Personal care products and services Medical and dental exponses Tensportation, Include gas, maintenance, bus or train fare. Do not include car payments. Entortainment, clubs, recreation, newspapers, magazines, and Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in line Insurance. Do not include insurance deducted from your pay or included in line Specify. Tags and insurance specify. Takes. Do not include lows deducted from your pay or included in line Specify. Personal property taxes Specify. Personal property taxes Specify. Personal property taxes Specify. Tags Inspections Specify. Tags Inspections Specify. Tags Inspections Tac. Car payments for Vehicle 1 Th. Car payments for Vehicle 2 Th. Car | es 4 or 20.  Enes 4 or 20.  en) Is Fargo)  add not report as efficial Form 6ij. edity you. Is form or on Schuce | 6a. \$ 6b. \$ 5c. \$ 6c. \$ 6d. \$ 7. \$ 8. \$ 9. \$ 10. \$ 11. \$ 12. \$ 13. \$ 14. \$ 15b. \$ 15b. \$ 15c. \$ 15c. \$ 15c. \$ 15c. \$ 15d. \$ 15d. \$ 17b.  | 264.00 285.00 217.00 300.00 0.00 300.00 50.00 10 |

4a. Real estate taxes

4b. Property, homeowner's, or renter's inswence

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condemitime dues

5. Additional mortgage payments for your residence, such as home equity leans

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